



\\ODMA\PCDOCS\FRXLIB\351626\1

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [] A check in the amount of \$ _____ to cover the fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344


Juan Carlos A. Marquez
Registration No. 34,072

REED SMITH LLP
3110 Fairview Park Drive
Suite 1400
Falls Church, Virginia 22042
(703) 641-4200
February 27, 2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)	
)	
KUSUNOKI et al.)	Unit 2828
)	
Application Number: 10/724,149)	Examiner
)	Philogene, Haissa
Filed: December 1, 2003)	
)	
For: DISPLAY DEVICE HAVING A THIN FILM)	
ELECTRON SOURCE ARRAY (AS AMENDED))	
)	
ATTORNEY DOCKET NO. AETE.0004)	

**Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.111

Sir:

This is in response to the Office Action dated November 25, 2005, the period for response to which expires on February 25, 2006. Please amend the above-identified application as follows: